

# SPECIAL EVENT PERMIT CONSOLIDATED APPLICATION FORM

(To be completed by the requesting Sponsor/Producer)

Application (SR)#: \_\_\_\_\_

Date Received: \_\_\_\_\_

## NOTICE TO PERMIT APPLICANT

- Completed Special Event Permit Applications must be submitted to the Office of Special Events a minimum of NINETY (90) calendar days prior to the date the event is scheduled to begin to avoid late fees.
- **BE SURE TO INCLUDE THE ATTACHMENTS LISTED ON PAGE 4 WITH THIS APPLICATION.**
- Submit all completed applications through the Office of Special Events, 1200 Market Street, Room 418, City Hall, St. Louis, MO 63103 or online at [www.stlouis-mo.gov/special-events](http://www.stlouis-mo.gov/special-events).
- Mail \$25.00 application fee (\$100 if event is less than 90 days away).

## I. GENERAL INFORMATION

EVENT TITLE/NAME:			
EVENT SPONSOR/PRODUCER:			
STREET ADDRESS:			
CITY, STATE, & ZIP CODE:			
BUSINESS PHONE:			
FAX #:			
Is this a 501(c)3 organization?: Attach 501(c)3 Federal Tax letter			<input type="checkbox"/> YES <input type="checkbox"/> NO
TAX I.D. #:		State Tax Exempt Number (if applicable)	
NAME OF AUTHORIZED AND RESPONSIBLE AGENT:			
AGENT TITLE:			
STREET ADDRESS:			
CITY, STATE, & ZIP CODE:			
TELEPHONE #:			
MOBILE PHONE #:			
EMAIL ADDRESS:			
EVENT DATE(S):	From:	To:	
EVENT HOURS Date:		Open: <input type="checkbox"/> AM <input type="checkbox"/> PM	Close: <input type="checkbox"/> AM <input type="checkbox"/> PM
Date:		Open: <input type="checkbox"/> AM <input type="checkbox"/> PM	Close: <input type="checkbox"/> AM <input type="checkbox"/> PM
Date:		Open: <input type="checkbox"/> AM <input type="checkbox"/> PM	Close: <input type="checkbox"/> AM <input type="checkbox"/> PM
EVENT SETUP Date:	Setup commencing at: <input type="checkbox"/> AM <input type="checkbox"/> PM		
DISMANTLE Date:	Completed by no later than: <input type="checkbox"/> AM <input type="checkbox"/> PM		

# CITY OF ST. LOUIS – SPECIAL EVENT PERMIT CONSOLIDATED APPLICATION FORM

**PROVIDE A BRIEF DESCRIPTION OF THE EVENT:**

List Dates this event has been held in the past  
(or indicate if this is event's first run)

**ESTIMATED ATTENDANCE FOR THE ENTIRE EVENT:**

**WHEN IS THE ATTENDANCE EXPECTED TO PEAK?**

**PROVIDE NAME, ADDRESS, PHONE AND CONTACT PERSON OF INSURANCE BROKER WHICH WILL PROVIDE INSURANCE FOR THE SPECIAL EVENT:**

Attach Certificate of Insurance

## II. EVENT DETAILS

DOES THE EVENT SPACE REQUIRE USE OF A PUBLIC PARK? Attach Parks Special Event Application Form		<input type="checkbox"/> YES	<input type="checkbox"/> NO
If yes, name of park(s) & specific location in park (ball fields, pavilion, boathouse, etc.):			
Will you be renting the bandwagon or other equipment from Parks Division? Attach Bandwagon Permit Application and/or Parks Equipment Request Form		<input type="checkbox"/> YES	<input type="checkbox"/> NO
Does the event require closing or use of city streets? Attach Application for Use of City Streets		<input type="checkbox"/> YES	<input type="checkbox"/> NO
Will the event require closure of any interstate on/off ramps or state highways? <u>Complete MoDOT Application</u> & Attach copy		<input type="checkbox"/> YES	<input type="checkbox"/> NO
Will the event include any of the following activities? (check all that apply)			
<input type="checkbox"/> AQUATICS			
<input type="checkbox"/> AERIAL ACTIVITIES			
<input type="checkbox"/> LIVE ANIMALS (including in the parade)			
<input type="checkbox"/> PYROTECHNICS/FIREWORKS Your vendor will be required to obtain a Fire Dept. Fireworks Permit			
<input type="checkbox"/> GAMES/RIDES Your vendor will be required to obtain a Building Division Permit			
WILL THERE BE MUSIC DURING THE EVENT?		<input type="checkbox"/> YES	<input type="checkbox"/> NO
If YES, will the music be electronically amplified?		<input type="checkbox"/> YES	<input type="checkbox"/> NO
Describe any other entertainment you have planned:			
WILL GENERATORS BE USED? Your vendor will be required to obtain a Building Division Permit		<input type="checkbox"/> YES	<input type="checkbox"/> NO
WILL A STAGE BE CONSTRUCTED? Your vendor will be required to obtain a Building Division Permit		<input type="checkbox"/> YES	<input type="checkbox"/> NO
WILL TENTS BE ERECTED? Your vendor will be required to obtain a Building Division Permit		<input type="checkbox"/> YES	<input type="checkbox"/> NO
WILL THERE BE TEMPORARY SIGNAGE, BALLOONS, BANNERS OR ADVERTISING?		<input type="checkbox"/> YES	<input type="checkbox"/> NO
WILL YOUR ORGANIZATION SELL/GIVE AWAY ALCOHOLIC BEVERAGES? Attach Picnic Liquor License Application OR Excise Caterer's Permit Application	<input type="checkbox"/> YES (sell)	<input type="checkbox"/> YES (give away)	<input type="checkbox"/> NO
WILL FOOD BE SOLD OR GIVEN AWAY? Attach Health Temporary Food Permit Application AND List of Vendors (including food trucks)	<input type="checkbox"/> YES (sell)	<input type="checkbox"/> YES (give away)	<input type="checkbox"/> NO
WILL YOU HAVE PORTABLE RESTROOMS/HANDWASHING? Attach Health Restroom Permit Application	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
DO YOU PLAN TO COOK OR WARM FOOD WITH PROPANE? Attach Fire Dept. Propane Tank Form	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
WILL YOU NEED USE OF HYDRANTS? Attach application for Water Wagon, Combo Drinking Fountain, OR Fire Hydrant Permit Application	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
WILL YOUR ORGANIZATION SELL/GIVE AWAY MERCHANDISE? Attach List of Vendors	<input type="checkbox"/> YES (sell)	<input type="checkbox"/> YES (give away)	<input type="checkbox"/> NO

# CITY OF ST. LOUIS – SPECIAL EVENT PERMIT CONSOLIDATED APPLICATION FORM

## III. SECURITY AND SAFETY PROCEDURES

It will be necessary for you to develop a Security and Safety Plan for your event. Your plan needs to include the number, hours, and locations for deployment of security personnel and equipment provided by the sponsor, procedures for crowd control, collection and depositing of cash, VIP areas, entertainer and stage security, media areas and private security services.

PLEASE LIST THE PERSON(S) OF AUTHORITY WHO WILL BE IN CHARGE DURING THE EVENT:

NAME	ROLE	ADDRESS	MOBILE PHN. #

WILL OFF DUTY POLICE OFFICERS BE HIRED TO SECURE THE EVENT?

☐ YES

☐ NO

WHAT IS THE NAME AND CONTACT INFORMATION OF THE SECURITY COMPANY PROVIDING SECURITY?

WHAT IS THE NUMBER OF SECURITY PERSONNEL ON SITE DURING THE EVENT:

WILL SECURITY REMAIN ON THE SITE/IN THE PARK OVERNIGHT?

☐ YES

☐ NO

IS SECURITY ARMED?

☐ YES

☐ NO

Depending on the size and nature of your event, it may be necessary to provide Emergency Medical Services for the event patrons.

WHO WILL BE PROVIDING THE STAFF AND THE EQUIPMENT FOR THE EMERGENCY MEDICAL FACILITY?

Name of Agency:

Contact Person:

Phone Number:

PLEASE INDICATE THE EQUIPMENT AND TYPE, AND NUMBER OF STAFF WHO WILL BE ON-SITE DURING ALL HOURS OF THE EVENT.

Ambulance:

Emergency Medical Technicians:

Paramedics:

Nurses:

Doctors:

Others (please specify):

## IV. PUBLICITY

How do you plan to publicize this event? (Attach sample flyers, brochures, provide web site link, etc.)

How do you plan to notify neighborhood residents/businesses of the event's impact on them? (Attach sample doorhangers, letters, etc.)

Provide phone number that can be used by the public for event inquiries:

## V. FINANCIAL INFO

Will admission be charged?

☐ YES

(everyone)

☐ YES

(VIP area)

☐ NO

If yes, fee structure/amount:

Will donations be solicited?

☐ YES

☐ NO

# CITY OF ST. LOUIS – SPECIAL EVENT PERMIT CONSOLIDATED APPLICATION FORM

## VI. CLEANUP DURING AND AFTER THE EVENT (Recycling MUST BE offered)

WHO WILL BE RESPONSIBLE FOR EMPTYING TRASH CANS, REMOVING TRASH FROM FOOD AND MERCHANDISE VENDOR BOOTHS AND PICKING UP LITTER IN THE EVENT AREA, BOTH DURING AND AFTER EVENT?

Name of business responsible for removals:

Contact Person:

Phone Number:

WHO WILL BE RESPONSIBLE FOR PROVIDING DUMPSTERS/HAULING AWAY TRASH & RECYCLABLES?

Name of business responsible for event cleanup:

If using City Refuse Div., attach Event Recycling Container Form

Contact Person:

Phone Number:

### ATTACHMENTS

**The following attachments must be included for your application to be complete:**

1. DETAILED SITE MAP: indicate the locations of the following applicable items within the event area:

- ☐ Stage area
- ☐ Alcoholic beverage area
- ☐ Food concession area
- ☐ Merchandise concession area
- ☐ Portable restroom facilities
- ☐ Dumpsters/trash/recycling containers
- ☐ Event headquarters
- ☐ Security/Emergency tents
- ☐ Police/Fire command post
- ☐ Inflatables/rides/live animals
- ☐ Picnic tables (if rented from Parks Dept.)
- ☐ Traffic/Pedestrian control devices (barricade, bike rack, detour sign placements)
- ☐ Map of any routed activities (parade, run, bike ride, walk, etc.)

2. SECURITY PLAN: include the number, hours, and locations for deployment of security personnel and equipment provided by the sponsor, procedures for crowd control, collection and depositing of cash, VIP areas, entertainer and stage security, media areas and private security services

3. EMERGENCY PLAN: include response/evacuation plan should unexpected weather or man-made disaster occur

4. LIST OF VENDORS: if using outside vendors for food/merchandise, including food trucks

6. PUBLICITY: attach sample brochures, flyers, neighborhood notification letters, etc.

7. CERTIFICATE OF INSURANCE

8. TAX EXEMPT LETTER

9. ALL SUPPLEMENTAL APPLICATIONS (as needed)

- |   |   |
|---|---|
| <input type="checkbox"/> Parks Application                  | <input type="checkbox"/> Health Food Permit Application                 |
| <input type="checkbox"/> Bandwagon Permit Application       | <input type="checkbox"/> Health Restroom Permit Application             |
| <input type="checkbox"/> Parks Equipment Request Form       | <input type="checkbox"/> Fire Dept Propane Tank Form                    |
| <input type="checkbox"/> Use of City Streets Application    | <input type="checkbox"/> Water Wagon                                    |
| <input type="checkbox"/> MoDOT Application                  | <input type="checkbox"/> Combo Drinking Fountain                        |
| <input type="checkbox"/> Picnic Liquor License Application  | <input type="checkbox"/> Fire Hydrant Permit Application                |
| <input type="checkbox"/> Excise Catering Permit Application | <input type="checkbox"/> Refuse Division Event Recycling Container Form |